## ISSUE SLIP STAPLE AREA (for additional cross references) **POSITION** INITIALS ID NO. **FEE DETERMINATION** O.I.P.E. CLASSIFIER **FORMALITY REVIEW RESPONSE FORMALITY REVIEW** INDEX OF CLAIMS . Rejected ..... Allowed Interference (Through numeral)... Canceled ...... Restricted Date Claim Date : Original Original 8-2-01 Final 11 12 13 17 14 18 **S** 19 **[]** 21 (V) 22 19 3 s 128 If more than 150 claims or 10 actions staple additional sheet here